

ISSUE SLIP STAPLE AREA (for additional cross refer

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------------|------------|-----------------|
| FEE DETERMINATION | <i>Robert G</i> | | <i>10-12-01</i> |
| O.I.P.E. CLASSIFIER | | <i>1/1</i> | <i>10/1/01</i> |
| FORMALITY REVIEW | <i>ET</i> | <i>705</i> | <i>11/09/01</i> |
| RESPONSE FORMALITY REVIEW | <i>ET</i> | <i>705</i> | <i>11/30/01</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

09/973,802

| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

913
11-09-01
261
11-30-01